

**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

1052050

FILING DATE

APPLICANT(S)

17-05571-50-17 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1		1			
2		1		1		
3		1		1		
4		1		1		
5	1		1			
6		1		1		
7		1		1		
8		1		1		
9		1		1		
10		1		1		
11		1		1		
12		1		1		
13		1		1		
14		1		1		
15		1		1		
16		1		1		
17	1		1			
18	1		1			
19		1		1		
20		1		1		
21	1		1			
22	1		1			
23		1		1		
24		1		1		
25		1		1		
26					1	
27						1
28						1
29						1
30						1
31						1
32						1
33						1
34						1
35						1
36						1
37						1
38					1	
39						1
40						1
41					1	
42						1
43						1
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	3	1	3	1	2	1
TOTAL DEP.		3		3		3
TOTAL CLAIMS	3	4	3	4	2	4

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51						
52						
53						
54						
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96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMMENDMENTS

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**MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET**
(FOR USE WITH FORM PTO-875)

SERIAL NO.

10/52052

FILING DATE

APPLICANT(S)

7-1-10 CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DER.	IND.	DER.	IND.	DER.
1						
2						
3						
4						
5						
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.			4			
TOTAL DER.			20			
TOTAL CLAIMS			24			

	★		★		★	
	IND.	DER.	IND.	DER.	IND.	DER.
51						
52						
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92						
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94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DER.						
TOTAL CLAIMS						

* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS